

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 23 OF 139

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Friends of Joe Heck

A. Full Name (Last, First, Middle Initial) Miriam Adelson		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>24</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		24		2013
M M	/	D D	/	Y Y Y Y									
05		24		2013									
Mailing Address 3355 Las Vegas Boulevard South		Transaction ID : 30529.C11379											
City Las Vegas	State NV	Zip Code 89109											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>2600.00</div>											
Name of Employer Self Employed	Occupation Physician	Receipt 											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>2600.00</div>												
B. Full Name (Last, First, Middle Initial) Miriam Adelson		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>06</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		06		2013
M M	/	D D	/	Y Y Y Y									
06		06		2013									
Mailing Address 3355 Las Vegas Boulevard South		Transaction ID : 30606.C11398											
City Las Vegas	State NV	Zip Code 89109											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>2600.00</div>											
Name of Employer Self Employed	Occupation Physician	Receipt 											
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>5200.00</div>												
C. Full Name (Last, First, Middle Initial) Joseph Finnegan		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>06</td> <td></td> <td>06</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	06		06		2013
M M	/	D D	/	Y Y Y Y									
06		06		2013									
Mailing Address 2001 Di Pinto Avenue		Transaction ID : 30606.C11440											
City Henderson	State NV	Zip Code 89052											
FEC ID number of contributing federal political committee. <div>C</div>		Amount of Each Receipt this Period <div>5000.00</div>											
Name of Employer Retired	Occupation Retired	Receipt 											
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <div>5000.00</div>												
SUBTOTAL of Receipts This Page (optional).....		<div>10200.00</div>											
TOTAL This Period (last page this line number only).....													